

City of Bel Aire, Kansas BUILDING PERMIT APPLICATION Inspections Call 744-2451 Ext. 120

DATE			PERMIT NO		
Address of building or project:			RECEIPT NO.		
		Fee \$			
Lot(s) Block	Add	ition			
Lot(s) Block Block Block					
QuarterSectionYes _ Construction Type	Township	Range	Key #		
Flood Plain Area?Yes _	No Floo	or Elevation	O		
Construction Type	_Hour Rating	Occupancy	Group		
DESCRIPTION OF IMPROVE	MENT				
Building to be used as:	Type of Impr	ovement:			
RESIDENTIAL	COM	IMEDOIAL	New Building	1	
1. One-family, detached	1. Multi-famil	IMERCIAL	2. Addition		
2. One-family, attached	2 Commerci	al Building	3. Alteration		
3. Two-family		other than Building	4. Repair		
4. Attached Garage		Agricultural Structure			
5. Detached Garage			6. Relocation		
6. Addition to Residence			7. Demolition		
7. Remodel of Residence					
8. Roofing and/or siding					
9. Pool and/or Spa					
10.Fire damage repair					
11.Storage Structure					
12.Other					
13.*Mobile Home					
*Size x		No. Buildings			
Year		No. Units			
Make					
Work being done for		Under Cor	ntract? Yes	No	
Owner	Contra		iliact:165	INO	
Address	Addre				
Phone	Phone	9			
Ownership:Public	Private	Responsible	Party		
Valuation: \$	Comr	nents			

DIMENSIONS

Frontage	Sq. Ft.	No. Stairways	No. Escalators
Depth	Finished	Basement-1st	No. Elevators
N. Stories	Unfin. Bsmt.	1 st -2nd	
Height	Att.Garage	2 nd -Roof	No. Bedrooms
	Access Bldg.		No. Bathrooms
Basement	Demolition	No. Parking Spaces	No. Other Rooms
1. None		Enclosed	No. Fireplaces
2. Partial 3. Full		Unenclosed	
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BUILDING CHARACTL	11101100			
Foundation Wall	Size of Joist	STRUCTURE		
		Frame	Roof	Floor
1. Wood	1 st Floor 2 nd Floor	1. Wood	1. Wood	1. Wood
2. Concrete	2 nd Floor	2. Concrete	2. Concrete	2. Concrete
Concrete Block	Ceiling	3. Metal	3. Metal	3. Metal
4. Other		4. Other	4. Other	4. Other
Covering				
Roof	Exterior	Interior Walls	Water Supply	Sewage Disposal
Wood Shingles	Walls	1. Drywall	1. Public	
2. Composition Shingles	1. Wood	2. Plaster	2. Private	1. Public
3. Tile	2. Concrete	3. Masonry		2. Septic
4. Metal	3. Masonry	4. Other		3. Lagoon
5. Concrete	4. Metal			
6. Built-up	5. Brick			
7. Other	Brick Veneer			
	Stone Veneer			
	8. Composition			
	Concrete Block			
	10. Other			
Fuel	Furnace	Brick Flues	Patented Pipe	
Natural Gas	Location	No	Flues	
2. LP Gas	1. Attic	Size	No	
3. Electric	2. Basement		Size	
4. Solar	3. Closet		<u> </u>	
	4. Floor			
Sidewalks Required?	YesNo	Historical Structure?	YesNo	
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ZONING STATUS

Zoning Classification	1				
Setbacks: Front Yar	dSide Yard	d Rear Yard	Other		
Other permits requ	ired: Sewer Tap	Water Tap	_ Electrical	_ Other	
MechanicalPlur	mbingBoiler	Elevator Approach	Sidewalk_		

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and resolutions governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

VOID UNLESS WORK STARTED WITHIN 180 DAYS

Signature of applicant	Date		
Bel Aire License #	Application approved by		